

Board of Education petition

Requesting the Attorney General to file charges seeking discipline of a holder of a certificate of license to teach (§168.071.2, RSMo Supp. 2002)

Return to:

Missouri Attorney General's Office Attn: Teacher Certification Discipline PO Box 899 Jefferson City, MO 65102

MISSOURI ATTORNEY GENERAL JEREMIAH W. (JAY) NIXON 573-751-1143 www.moago.org

PETITIONER'S INFORMATION				
PETITIONER'S NAME	POSITION			
SCHOOL DISTRICT	DISTRICT LOCA	ATION		
TEACHER'S INFORMATION				
TEACHER'S NAME	()			
TEACHER S IVAIVIE		CURRENT HOME PHONE		
CURRENT ADDRESS	CITY	STATE ZIP		
SCHOOL WHERE TEACHER WAS/IS WORKING				
SCHOOL'S ADDRESS	CITY	STATE ZIP		
FACTS				
Specific subsection of §168.071.1, RSMo Supp. 2002, under which petitioner believes teacher should be disciplined				
under which petitioner believes teacher should be discipline				
Complete statement of facts giving rise to this petition (at	tach additional nages as need	dod).		
Provide copies of any documents, including correspondence in your possession that petitioner believes provide informations.	e, notes and minutes of meet tion relevant to the allegations	ings, S.		

FACTS			
List every person having first-hand knowledge of fac	cts giving rise to this petition	(attach additional pages as needed):	
		()	
NAME	POSITION	HOME PHONE	
HOME ADDRESS	CITY	STATE ZIP	
		()	
NAME	POSITION	HOME PHONE	
HOME ADDRESS	CITY	STATE ZIP	
NAME	POSITION	() HOME PHONE	
TVANIL	TOSITION	HOME PHONE	
HOME ADDRESS	CITY	STATE ZIP	
Haralana and a same and haran investored in this world and	If an allowed list each agreement	turneling d	
Has law enforcement been involved in this matter?	If so, please list each agency	involved.	
Is there any other civil or criminal litigation involvin knowledge, please list the names of all cases and o	g any aspect of the facts raise courts in which such litigation	ed by this petition? If so, to the best of your is pending.	
.			
CASE NAME	COURT		
CASE NAME	COURT	COURT	
CASE NAME	COURT		
Submitted by NAME		() PHONE	
INAIVIE		PHONE	
ADDRESS	CITY	STATE ZIP	
VERIFICATION STATEMENT		NOTARY SIGNATURE	
I attest that I am authorized to petition the Attorney General of Missouri by a majority of the Board of Education of		d and sworn before me, this day	
	of	, 2	
PETITIONER'S SIGNATURE	NOTARY PL	IBLIC'S SIGNATURE	

Please return the completed petition and all required documentation to:

Missouri Attorney General's Office Attn: Teacher Certification Discipline PO Box 899 Jefferson City, MO 65102